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DATE: August 10, 2005
 TO: COMMISSIONER FOR PATENTS, U.S. PATENT & TRADEMARK OFFICE
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 NO. OF PAGES: Cover + 12

CERTIFICATE OF FACSIMILE TRANSMISSION I hereby certify that this correspondence is being facsimile transmitted to the U.S. Patent and Trademark Office on the date indicated below.		APPLICATION NO.	09/823,702
<u>Renee M. Franks</u> Typed/Printed Name		FILING DATE	03/30/2001
<u>Renee M. Franks</u> Signature		FIRST NAMED INVENTOR	William B. Boyle
<u>August 10, 2005</u> Date		ART UNIT	2616
		CONFIRMATION NO.	7429
		EXAMINER	Huy Thanh Nguyen
		ATTORNEY DOCKET NO.	K35A0740
TITLE	SET-TOP BOX THAT PROVIDES VIDEO DATA STREAM TO A DISPLAY DEVICE BASED ON SELECTION BETWEEN RECORDED VIDEO SIGNAL RECEIVED FROM THE DIGITAL VIDEO RECORDER AND A REAL-TIME VIDEO SIGNAL		

ATTACHED WITH THIS SUBMISSION:

1. Transmittal Form (1 page)
2. Fee Transmittal Form (1 page)
3. Information Disclosure Statement / PTO/SB/08A and PTO/SB/08B (2 pages), including one reference (8 pages)

PLEASE CONFIRM RECEIPT OF THIS TRANSMISSION. IF THERE IS ANY PROBLEM WITH THIS TRANSMISSION, PLEASE CALL RENEE M. FRANKS AT (949) 672-7871.

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PTO/SB/21 (09-04)

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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	09/823,702
Filing Date	03/30/2001
First Named Inventor	William B. Boyle
Art Unit	2616
Examiner Name	Huy Thanh Nguyen
Total Number of Pages in This Submission	K35A0740

ENCLOSURES (Check all that apply)

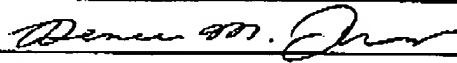
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Western Digital		
Signature			
Printed name	Milad G. Shara, Esq.		
Date	August 10, 2005	Reg. No.	39,367

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature			
Typed or printed name	Renee M. Franks	Date	August 10, 2005

This collection of information is required by 37 CFR 1.6. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL For FY 2005

 Applicant claims small entity status. See 37 CFR 1.27TOTAL AMOUNT OF PAYMENT (\$)
180

Complete if Known

Application Number	09/823,702
Filing Date	03/30/2001
First Named Inventor	William B. Boyle
Examiner Name	Huy Thanh Nguyen
Art Unit	2616
Attorney Docket No.	K35A0740

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____

Deposit Account Deposit Account Number: **23-1209** Deposit Account Name: **WESTERN DIGITAL**

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent

Small Entity	Fee (\$)	Fee (\$)
	50	25

Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent

200	100
-----	-----

Multiple dependent claims

360	180
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Total Claims

Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
- 20 or HP =	x 50	=			

HP = highest number of total claims paid for, if greater than 20

Indep. Claims

Extra Claims	Fee (\$)	Fee Paid (\$)			
- 3 or HP =	x 200	=			

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x		=

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: Submission of Information Disclosure Statement (FC 1806)

Fees Paid (\$)

180

SUBMITTED BY:

Signature		Registration No. (Attorney/Agent) 39,367	Telephone (949) 672-7814
Name (Print/Type)	Milad G. Shara, Esq.	Date	August 10, 2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Complete if Known

Substitute for form 1449/PTO

**INFORMATION DISCLOSURE
STATEMENT BY APPLICANT**

(Use as many sheets as necessary)

Sheet

1

of

2

Application Number	09/823,702
Filing Date	03/30/2001
First Named Inventor	William B. Boyle
Art Unit	2616
Examiner Name	Huy Thanh Nguyen
Attorney Docket Number	K35A0740

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U. S. PATENT DOCUMENTS

Examiner Initials*	Cite No. ¹	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number-Kind Code ² (<i>if known</i>)			
1	US- 6,040,851		03-21-2000	Cheng et al.	
2	US- 6,118,873		09-12-2000	Lotspeich et al.	
3	US- 6,133,908		10-17-2000	Scibora et al.	
4	US- 6,137,539		10-24-2000	Lownes et al.	
5	US- 6,141,002		10-31-2000	Kanungo et al.	
6	US- 6,233,393		05-15-2001	Yanagihara et al.	
7	US- 6,266,483		07-24-2001	Okada et al.	
8	US- 6,442,328		08-27-2002	Elliott et al.	
9	US- 4,879,611		11-07-1989	Fukui et al.	
10	US- 4,977,455		12-11-1990	Young	
11	US- 5,187,589		02-16-1999	Kono et al.	
12	US- 5,541,738		07-30-1996	Mankovitz	
13	US- 6,751,402		06-15-2004	Elliott et al.	
	US-				

FOREIGN PATENT DOCUMENTS

Examiner Initials*	Cite No. ¹	Foreign Patent Document	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages Or Relevant Figures Appear	T ⁴
		Country Code ³ Number ⁴ Kind Code ⁵ (<i>if known</i>)				

Examiner Signature	Date Considered
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. ¹Applicant's unique citation designation number (optional). ²See Kinds Codes of USPTO Patent documents at www.uspto.gov or MPEP 801.04. ³Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). ⁴For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. ⁵Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST.16 if possible. ⁶Applicant is to place a check mark here if English language Translation is attached.

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Substitute for form 1449/PTO				Complete if Known	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT					
(Use as many sheets as necessary)					
Application Number	09/823,702				
Filing Date	03/30/2001				
First Named Inventor	William B. Boyle				
Art Unit	2616				
Examiner Name	Huy Thanh Nguyen				
Sheet	2	of	2	Attorney Docket Number	K35A0740

NON PATENT LITERATURE DOCUMENTS

Examiner Signature		Date Considered	
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**EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.*

1 Applicant's unique citation designation number (optional). **2** Applicant is to place a check mark here if English language Translation is attached.

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